

**PROCESS RECEIPT AND RETURN**  
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	United States of America	COURT CASE NUMBER	3:10CR234
DEFENDANT	Matthew Galloway	TYPE OF PROCESS	Consent Order of Forfeiture
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
	Compaq 700Z desktop SN:-629, Compaq 3765 iPaq SN: -H079, Western Digital 500GB SN: -8207		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

AUSA Benjamin Bain-Creed  
U.S. Attorney's Office, WDNC  
227 W. Trade St., Ste. 1650  
Charlotte, NC 28202

Number of process to be  
served with this Form 285

Number of parties to be  
served in this case

Check for service  
on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,  
All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

CATS No. 11-FBI-000817

Please sign and return this form confirming possession of property in accordance with law

Signature of Attorney other Originator requesting service on behalf of:

s/ Benjamin Bain-Creed *LCMM*

☒ PLAINTIFF

☐ DEFENDANT

TELEPHONE NUMBER

704-344-6222

DATE

3/07/2012

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
		No. _____	No. _____		

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described  
on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion  
then residing in defendant's usual place  
of abode

Address (complete only different than shown above)

Date 3/7/12 Time 3:00 ☐ am ☒ pm

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)

REMARKS:

PRIOR EDITIONS  
MAY BE USED

PRINT 5 COPIES

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE

4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment,  
if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

FORM USM-285  
Rev. 12/15/80  
Automated 01/00